

**PEPETION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(A)****FY 2005**

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Docket Number:

NTI-703-1P1P

Application Number: 10/618,816

Filed: 07/11/2003

For: "System And Method For Providing Defect Printability Analysis Of Photolithographic Masks. . ."

Art Unit: 2825

Examiner: Vuthe Siek

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	Fee	Small Entity Fee	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$120.00
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$

☐ Applicant claims small entity status. See 37 CFR 1.27.☐ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number: 50-0574 (Atty. Docket No: NTI-703-1P1P). I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.☐ assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).☒ attorney or agent of record. Registration Number 35,537☐ attorney or agent under 37 CFR 1.34(a)

Registration number if action under 37 CFR 1.349a) _____

Signature: _____

Jeanette S. Harms, Esq.

Date: December 23, 2005

Telephone: (408) 451-5907

Customer No.: 35273

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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

I hereby certify that this correspondence is being deposited with the United States Postal Service as FIRST CLASS MAIL in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on December 23, 2005.

12/23/2005
Date

Signature: Rebecca A. Baumann